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Date: September 8, 20

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Reference: U.S. Patent Application No.: 10/622,065
"SHAPE MEMORY ALLOY ACTUATOR"
Examiner: Sheldon J. Richter
Art Unit: 3748
Docket No. 606-55-PCT-CON

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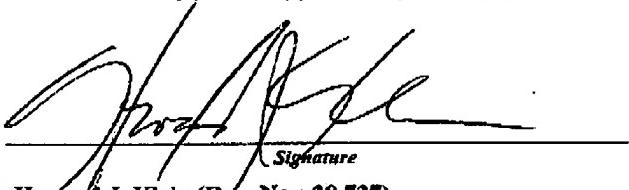
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- ❖ Certificate of Facsimile Transmission (1 page);
 - ❖ Amendment Transmittal Letter (1 page); and
 - ❖ Response to Office Action (5 pages)

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CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)			Docket No. 606-S5-PCT-CON
Applicant(s): Morton Mernoe	Application No. 10/622,065	Filing Date July 17, 2003	Examiner Sheldon J. Richter
Invention: SHAPE MEMORY ALLOY ACTUATOR			
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I hereby certify that this <u>Amendment Transmittal Letter</u> (Identify type of correspondence) is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. <u>703-872-9306</u>)			
on <u>September 8, 2004</u> (Date)			
<u>Carrie Anne Cheung</u> (Typed or Printed Name of Person Signing Certificate)  (Signature)			
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AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No. 606-55-PCT-CON	
Applicant(s): Morton Mernoe					
Application No. 10/622,065	Filing Date July 17, 2003	Examiner Sheldon J. Richter	Customer No. 22145	Group Art Unit 3748	Confirmation No. 1837
Invention: SHAPE MEMORY ALLOY ACTUATOR					
<u>COMMISSIONER FOR PATENTS:</u>					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	10 -	20 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	2 -	3 =	0 x	\$86.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<p><input checked="" type="checkbox"/> No additional fee is required for amendment.</p> <p><input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____</p> <p><input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 11-1159</p> <p><input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16.</p> <p><input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.</p>					
 <i>Signature</i> Howard J. Klein (Reg. No.: 28,727) Klein, O'Neill & Singh, LLP (Customer No.: 22145) 2 Park Plaza, Suite 510 Irvine, California 92614 Tel: (949) 955-1920 Fax: (949) 955-1921 Email: hjklein@koslaw.com					
Dated: September 8, 2004					
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<p><i>Typed or Printed Name of Person Mailing Correspondence</i></p>					

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Morton Mernoe)
 Application Number: 10/622,065)
 Filed: July 17, 2003)
 Group Art Unit: 3748)
 Examiner: Sheldon J. Richter)
 For: SHAPE MEMORY ALLOY ACTUATOR)

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AMENDMENT AND RESPONSE

Dear Sir:

In response to the office action mailed June 9, 2004, please amend the subject application as follows:

Amendments to the Claims are set forth in the listing of the claims beginning on page 2 of this paper.

Remarks/Arguments begin on page 5 of this paper.

Attorney Docket No.: 606-55-PCT-CON